

BOOK REVIEWS

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Sexual Attitudes and Lifestyles. By Anne M. Johnson, Jane Wadsworth, Kaye Wellings, Julia Field, (Foreword by Sir Donald Acheson). Oxford, Blackwell (£29.50, pp 499.) 1994. ISBN 0-632-03343-6.

Here it is then: the sex survey which Mrs. Thatcher tried to ban and which spiced up the Sunday supplements earlier this year. What lies between its beguilingly plain covers?

Firstly, a text which is readable, beautifully laid out, with excellent statistical tables and figures, and chunky, relevant, appendices. Secondly, a zeitgeist of British sexual attitudes and lifestyles for the nineties. Everybody who works in the sexual health arena should be aware of these findings.

The former Prime Minister might be reassured to discover that, as a nation, we are strongly committed to heterosexual monogamy, condemning casual sex and homosexuality. There's not a Mars bar in sight as our sexual repertoire within heterosexual monogamy focuses on vaginal intercourse.

This research looks much further than these broad brush strokes. There is a mass of information which demands a response. Health promoters will find insights into sexual attitudes which might be harnessed to support healthy sexual behaviour. There is a clear need to change safer sex advice from lists of "don'ts" to more positive advice, based upon the evidence presented here. For example, the widowed/separated/divorced are at highest risk of unsafe sex but are a neglected audience for health promotion. The language of safer sex needs careful attention, as jargon such as "non-penetrative sex" and "mutual masturbation" were poorly understood.

Genitourinary medicine, referred to as "sexually transmitted diseases" throughout, will be intrigued to learn that there was no link between circumcision and clinic attendance, nor between clinic attendance and infertility. Frequency of partner change, particularly among men who have sex with men, however, does influence clinic attendance. One in eight of the population has been tested for HIV antibody. Service developments should be discussed with local gay men.

Roll over *Masters and Johnson* for *Johnson et al.* There is masses of thought-provoking material in this landmark publication, which is an essential reference on sexual health in Britain in the nineties.

MARTIN JONES

Obstetric and Gynecologic Infectious disease. Edited by: J G Pastorek II, New York, Raven Press, 1993, (pp 824. \$157.50).

Topics related to genital tract infection fall into three broad categories. The first includes most sexually transmitted infections, well-known to and best treated by GU physicians. The second contains the infections, some sexually transmitted, which produce damage or sequelae. In this group are included salpingitis and wart-virus; and knowledge and skills in management of these conditions are shared, sometimes uncomfortably, between GU physicians and gynaecologists. The third category are infections which are often relevant in pregnancy and sometimes severe and life threatening, and these are much less familiar to the GU physician. In this vast book, an attempt is made to cover all three categories.

First it must be stated that this is not a book with a balanced array of international contributors. Of the 88 who are authors or co-authors of chapters, 86 come from the USA and about half of these from the three states of Louisiana, Texas and Florida. This parochiality is a major drawback and most certainly the editor could have enlisted contributions from an international field of excellence if he had tried.

One section of 186 pages deals with sexually transmitted diseases. This is somewhat shorter than the average post-graduate textbook on this subject, and the contents of this section are not particularly inspired. Nevertheless no GU physician would go to this book to read about STDs and therefore the quality of the other sections is more relevant to this review.

The initial section on *General Considerations* covers 74 pages. In a book that attempts to probe this subject in depth such a section is vital; but this one is far too short. It is particularly disappointing that immunology is covered in only 10 pages with 10 references and without special mention of pregnancy.

Gynaecological infection is better covered in the second section. *Pelvic Inflammatory Disease* is covered in only 16 pages, but 181 references indicate how tightly packed these are with information. The section on *Septic Shock* and *Toxic Tampon Syndrome* is most useful, as is that on immuno-compromised women. Full marks for the editor for including a section on necrotising fasciitis before it became a fashionable condition!

The coverage of obstetric infection is patchy. Is *TORCH* really still a useful concept, or does it stop diagnosticians thinking beyond this narrow range? Intra-amniotic and virus infection are well covered, but even as a practising obstetrician I find a whole chapter of ten pages on the infectious complications of episiotomy greatly excessive.

Even more uneven is the final section on diagnostic and therapeutic concepts. Antimicrobial therapeutics is well done, with good evaluations of all the relevant drugs. However, colposcopy and cytology are covered in four pages containing 1000 words and four references which are to work published in 1923, 1943, 1955 and 1964! As it is written this chapter is wasted space, and a completely lost opportunity to explore two very important topics.

I cannot recommend GU physicians to

use this book as a reference on STDs; there are bigger, better and cheaper alternatives. However, it would provide for the GU physician an insight into those other aspects of female infection that are not found in GU texts, and as such could be valuable. Perhaps it should find a place in the larger medical library and where research is undertaken. But it must not be thought of as a comprehensive review of the subject, which it most certainly is not!

M J HARE

HIV Epidemiology—models and methods. Alfredo Nicolosi (ed.) New York, Raven Press (\$107.50, pp 367) 1993. ISBN 0-7817-0118-X.

Nicolosi's preface reminds the reader that the very complexity of HIV infection has required the epidemiological methods of both chronic and infectious diseases to be deployed; biases inherent in early studies have been learned from. There remain challengingly unclear and controversial issues—not least in terms of preventing HIV transmission—which the different epidemic patterns of HIV in industrialised and developing countries continue to highlight.

This book, the proceedings of an international workshop organised by the Italian National Research Council in September 1992, reflects the current achievements of HIV epidemiological research, compares the methodologies used in different major studies, and debates future improvements. One of its attractions is to have included verbatim discussion of the presented papers. This was invariably polite, usually incisive, mostly to-the-point, and certainly rescued the one weak paper.

Section headings give a good sense of the book's scope beginning with intravenous drug users (four papers ranging from prevention, HIV seroconversion, AIDS progression and cause-specific mortality); international comparative epidemiology (two papers); heterosexual transmission (four papers ranging from partner studies, review of epidemiological methods for investigating the role of sexually transmitted diseases as risk factors in HIV transmission to contraceptive practices). Issues of study design, for example in the measurement of sexual behaviour, come next (three papers); then vaccine trials against HIV infection (two papers covering both obstacles to an AIDS vaccine and methodological issues in measuring efficacy); a short section follows on statistical data analysis (attributable risk, rather abstract in style) and interpretation (a masterly exposition by Tsiatis for appreciative non-statisticians of confounding, multicollinearity, measurement errors and surrogate markers and their relationship to logistic regression, which is much used). Section 7 deals with natural history (four papers range from the contribution of cohort studies to understanding the natural history of HIV infection, through trends in incidence of AIDS defining conditions and the Italian seroconversion study to epidemiological aspects of HIV infection and cancer). Finally, three papers consider the